

# Claim Adjustment Request

Completed by lender, holder or servicer and submitted to the California Student Aid Commission  
with supporting documentation attached



## A. Borrower Information

1. Social Security number	2. Borrower name (last, first, middle initial)
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## B. Student Information (complete for PLUS loans only)

3. Social Security number	4. Student name (last, first, middle initial)
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## C. Loan Information (complete a separate claim form for each type of loan)

5. Check ☒ one box: ☐ Stafford ☐ SLS ☐ SLS fixed ☐ PLUS ☐ PLUS fixed ☐ Consolidation 6. Interest rate \_\_\_\_\_

7. Loan I.D. number: (If unknown, list: amount guaranteed, date of first disbursement and loan type, i.e., SLS, PLUS, etc.)

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\_\_\_\_\_

## D. Type of Adjustment Requested

8. This account is being submitted for: (check only one)

8a. ☐ Claim adjustment increase 8b. ☐ Claim adjustment decrease 8c. ☐ Appeal

## E. Financial Data

9. List the following information :	
9a. Data from the lender's records:	9b. Data from Commission Claim Purchased/Adjusted report:
Principal amount = \$ _____	Principal amount = \$ _____
Interest amount = \$ _____	Interest amount = \$ _____
Interest paid from: _____	Ending date of report _____
through: _____	

9c. Amount lender is disputing: \$ \_\_\_\_\_ Number of days of interest lender is disputing: \_\_\_\_\_

10. Basis for Claim Adjustment Request (attach additional pages if needed):

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\_\_\_\_\_

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## F. Lender/Holder Information

11. Lender code _____-_____-_____-_____-_____-_____-	12. Lender/Holder name	13. Phone number ( )	
14. Address (number and street)	City	State	Zip code
15. Loan officer's name and title (print or type)	16. Signature of loan officer ▶	Date	

# Instructions for Completing Claim Adjustment Request

**All numbered sections on this form must be completed as outlined below. Please type or print clearly.**

The Claim Adjustment Request form must be completed by a lender to request an adjustment to a claim payment or to dispute a claim adjustment. A separate form must be completed by the lender for each account in need of an adjustment or in dispute. If a significant number of accounts have been affected by the same error, one form may be completed and a list of the accounts affected by the error should be attached. Include: borrower's name, SSN, and loan identification number. The Commission will make claim adjustments only if the amount in question is greater than \$10 per account.

## Section A: Borrower Information

1. Enter the borrower's Social Security number.
2. Enter the borrower's name (first, last, middle initial).

## Section B: Student Information (complete for PLUS loans only)

3. Enter the Social Security number of student for whom the loan is made.
4. Enter the name (first, last, middle initial) of student for whom the loan is made.

## Section C: Loan Information (Complete a separate claim form for each type of loan).

5. Check the applicable loan type.
6. Enter the current interest rate for variable rate loans, or the interest rate at guarantee for fixed rate loans.
7. List loans included in this claim by either the loan identification number assigned by the Commission at the time of guarantee or by the amount disbursed and the date of the first disbursement.

## Section D: Type of Adjustment Requested

8. Check the applicable reason for submitting this request.
  - A. Claim Adjustment Increase — check this box if you were **underpaid** on the claim in question. **Note:** the Commission will not pay claim adjustment increases based on information which was not present in the claim file at the time of original adjudication.
  - B. Claim Adjustment Decrease — check this box if you were **overpaid** on the claim in question.
  - C. Appeal — check this box if you are disputing a denial of a prior claim adjustment request.

## Section E: Financial Data

9.
  - A. Indicate the following information as found in the lender's records:  
Principal Amount — list the amount of the principal balance outstanding on the date of default as shown in your file.  
Interest Amount — list the amount of interest your records indicate was due through the date of the claim payment by the Commission.  
Interest Paid From/Through — indicate the dates you used to determine the amount of interest. (This typically is the date interest was paid to on your system through the date the Commission paid you interest as shown on the CPA report.)
  - B. Indicate the following information as found on the Claim Purchased/Adjusted Report:  
Principal Amount — enter the amount of the principal paid as shown on the Claim Purchased/Adjusted report.  
Interest Amount — enter the amount of interest paid, as shown on the Claim Purchased/Adjusted Report.  
Ending Date of Claim Purchased/Adjusted Report — enter the cycle date of the report from which you obtained the above figures. (Ending date is located in the upper left corner of the report).
  - C. Indicate the dollar amount in dispute on the claim. Indicate the number of days of interest in dispute on the claim.
10. Cause of Discrepancy/Dispute Information — provide all pertinent information supporting your request for an adjustment on your claim adjustment dispute.

## Section F: Lender/Holder Information

11. Enter the eight-digit lender I.D. code which consists of the six-digit code assigned by the U.S. Department of Education and the two-digit suffix assigned by the Commission (usually -00).
12. Enter the name of the lending institution or holder of the note(s).
13. Enter the telephone number and area code of the person to contact regarding this claim adjustment request or dispute.
14. Enter the address to which correspondence regarding this request/dispute should be mailed.
15. Print or type the name and title of the individual who should be contacted regarding this claim adjustment request or dispute, and the date this form was completed.
16. The authorization loan officer **MUST** sign and date the claim adjustment request form.

## Instructions for Mailing Claim Adjustment Request Form

All completed Claim Adjustment Request forms, with supporting documentation attached, must be mailed to the following address: California Student Aid Commission, Claims Office, P.O. Box 510631, Sacramento, CA 94245-0631.

If the Commission determines that a lender is due additional money, the claim adjustment increase will be processed. The amount of the increase will appear on a future Claim Purchased/Adjusted Report. If the Commission determines that a lender owes additional money, a claim adjustment decrease will be initiated. A lender will be invoiced for the amount owed.